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POPULATION TODAY

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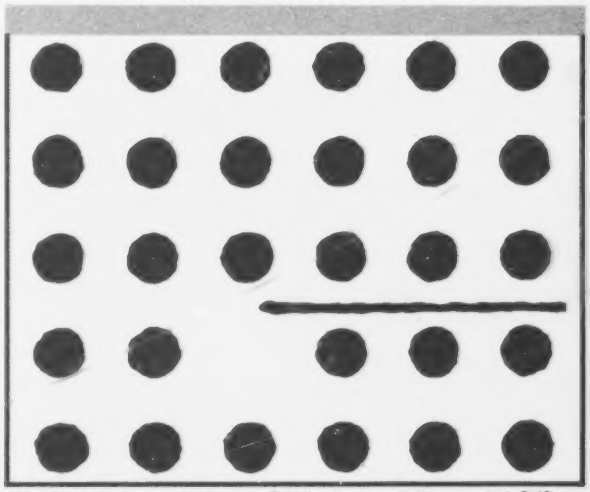

What's the line pointing to? What are all these dots? (See page 2.)

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FROM THE EDITOR'S DESK

The way some people toss around the term "one million," you'd think it was only a humble unit in their oh-so-important scheme of things. Feel like a million; a million galaxies; a million-dollar start-up grant.

Want to get a handle on this august quantity? Politicians' analogies might help (a million dollars in one-dollar bills would make a stack as tall as ...). But surely the clearest description of this famous mega-number is to be found in a book published in 1970 by Simon and Schuster.

Compiled by author Hendrik Hertzberg and now sadly out of print, the book *One Million* consists of 200 pages. On each page is an array of 5,000 black dots arranged in a 50 by 100 matrix.

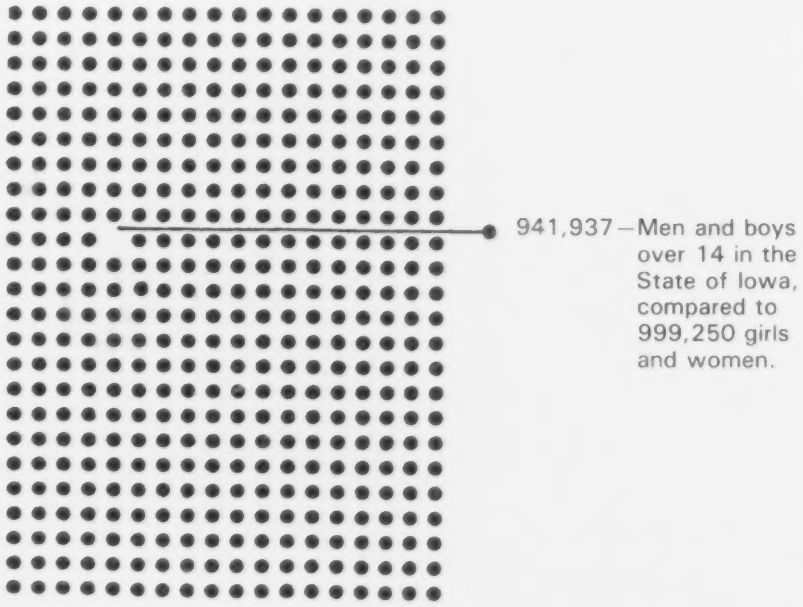
In sum, between the two covers of *One Million* are precisely 1 million dots. Some of these are more equal than others and are annotated by Hertzberg; the 941,937th dot and its predecessors, for example, equal the number of males in Iowa in 1970.

The page portion reproduced below will likely (a) cause a soul-searching reevaluation of your grasp of huge numbers, and (b) make plainer mathematician Leopold Kronecker's classic epigram that "God made integers; all else is the work of man." No question about it – *One Million* is a book in a million.

– Art Haupt

SPEAKING GRAPHICALLY

Part of a page from One Million



One Million © 1970 Bradley Smith – Hendrik Herzberg

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Projecting a World of 10.4 Billion

The World Bank will soon release its latest (1987-1988) global population projections for countries of the world, carried out as far as 2100.

Except for a slight upward revision in totals, the forthcoming version differs little from those in the Bank's 1985 projection. A closer look reveals that this upward revision is mostly accounted for by South Asian and West Asian countries. The outlook for other regions has either varied little from previous ones or dropped somewhat – except for countries of Africa, where a large upward revision was made for Kenya, Ethiopia, Burkina Faso, Nigeria, and Egypt.

The Bank devotes some of the report to explaining its methodology, data sources, and assumptions and comparing its projections with those of the UN. Its base data include Bank's own estimates based on more updated data collected by the Bank's economist and projection officers. Differing from the UN's method, the Bank prepared its figures taking into account not only geographic region but also level of development and national income. (Years ago the Bank prepared its population projections for internal use, but began to distribute these figures to an international audience in 1984.)

World population is projected to rise from 4.8 billion in the base year of 1985 to 6.2 billion in 2000, 9.5 billion in 2050, with ultimate population size projected to reach 10.4 billion in 2100, more than twice its present level.

All this assumes that world fertility will decline to replacement level sometime between 2035 and 2045 for most less developed countries, and between 2000 to 2020 for the more developed countries and those countries where significant fertility reduction has already been achieved, such as China and India.

The Bank expects the birth of the 10 billionth person to occur around 2070, but by then population growth will have almost stabilized, and there will be no 11 billionth person. By 2100, 87 percent of global population would live in today's "less developed countries."

Projected Population of the 15 Most Populous Countries (in Millions) in 1985 and 2100

1985 ranked by pop. size		2100 ranked by pop. size		
1. China	1,040	1. China	1,683	(2010)
2. India	765	2. India	1,678	(2000)
3. USSR	277	3. Nigeria	529	(2035)
4. United States	239	4. Pakistan	395	(2035)
5. Indonesia	162	5. USSR	385	(2020)
6. Brazil	136	6. Indonesia	363	(2010)
7. Japan	121	7. Brazil	292	(2010)
8. Bangladesh	101	8. United States	279	(2020)
9. Nigeria	100	9. Ethiopia	204	(2040)
10. Pakistan	96	10. Mexico	197	(2010)
11. Mexico	79	11. Iran	157	(2020)
12. Vietnam	62	12. Philippines	137	(2015)
13. W. Germany	61	13. Egypt	132	(2020)
14. Italy	57	14. Japan	124	(2020)
15. U.K.	56	15. Tanzania	123	(2035)

Note. Year that country achieves replacement level fertility (approximately 2.1 lifetime births per woman) is given in parentheses. In the case of the U.S. and Japan, this assumes a slight rise in fertility; all others are assumed to fall to this level.

Source: World Populations 1987-88: Short- and Long-term Estimates by Age and Sex with Related Demographic Statistics (forthcoming).

The world's annual population growth rate is projected at 1.7 percent for 1985-1990, and 0.9 percent for 2020-2025, and will continue to decrease to 0.07 percent in 2100, due to a considerable decrease in the global birth rate and a moderate decrease in the death rate.

> Among developed countries, only the USSR, the U.S., and Japan will remain among the top 15

The most drastic decline in the birth rate is projected for the African population. Africa's death rate is also projected to decreases greatly, while the death rate elsewhere declines only slightly. (The death rate is projected actually to increase in the more developed countries because of population aging.) Nonetheless, the projected ultimate population of the sub-Sahara region will be nearly five times its present size.

The lowest annual growth rates are projected for Europe, followed by North America. Among Asian countries, China is growing the slowest, while Sri Lanka, Pakistan, and Bangladesh have the highest growth rates.

The accompanying table shows the Bank's "Top 15" in national population size, as of 1985 and as of 2100 (projected). The 2100 population also stands as the ultimate projected population for each country. In 2100, it is anticipated that China will remain at the top of the population mountain. India is expected to start adding more people per year to its population than China, but even so will never overtake its more populous neighbor.

Comparing the top 10 countries in 1985 and 2100, except China and India, the relative country rankings ranking of ultimate population size in 2100 are expected to be somewhat different from those in 1985. Nigeria will be the

Continued on next page

10.4 Billion

Continued from preceding page

third with its very high growth rate. Pakistan, which was ranked 10th in 1985, will rise to fourth by 2100. Ethiopia and Mexico will join the top 10, with Japan and Bangladesh dropping off. Among more developed countries, only the USSR, the U.S., and Japan will remain among the top 15.

The World Bank's *World Populations 1987-88: Short- and Long-Term Estimates by Age and Sex with Related Demographic Statistics* will be published in book form in early 1988.

— Machiko Yanagishita

Census Controversy

The Census Bureau has long prided itself on the noncontroversial impartiality of its number-crunching. Even impartial number-crunching can become enmeshed in strife, however.

Barbara Bailar, an associate director for statistical standards and methodology and president of the American Statistical Association, has resigned from the Census Bureau. Bailar did not make public her reasons for leaving Census. But on Oct. 20, 1987, the Commerce Dept. announced that the 1990 Census would be conducted without any adjustment for undercount (see December 1987 *PT*). Bailar had developed what she believed was a reliable statistical method, based upon a postcensal survey of 300,000 households, for adjusting the count.

The *Washington Post* suggests that the Bailar resignation was due to the decision, quoting an unnamed source in the statistical community that "it wasn't the fact they decided not to adjust but the fact that political factors may have entered into the decision."

In the view of most statisticians, a census adjustment would most likely result in hiking the population counts of urban areas, which contain high concentrations of minorities and which traditionally vote Democratic. Ultimately, the chief purpose of the U.S. decennial census is a political one: to apportion seats in the U.S. House of Representatives and state legislatures – hence the controversy.

— *C.H.*

New York Loses Census Case

A verdict has finally been rendered in the eight-year-old New York suit against the U.S. Census Bureau. A federal court has decided that the Bureau does not have to adjust its decennial population count to compensate for any expected undercount.

Judge John Sprizzo of the U.S. District Court in New York ruled Dec. 8 against the suit brought by the city and state. The suit had mandated an undercount adjustment be included in the final population totals. Because minority groups tend to be undercounted more than the total population, and because such groups are disproportionately concentrated in New York City compared to the country as a whole, undercounting could mean that the city could lose federal grant money calculated on a per capita basis, and could even affect the decennial apportionment of the House of Representatives.

The New York suit is one of the legacies of the 1980 Census. The case originally went to trial in 1980 and at that time was decided in favor of New York, but the appellate court reversed the decision and sent the case back to the lower court for reconsideration (in time for the Bureau to actually release the census results). In January 1984, a second trial in New York was held, and the decision of Dec. 8, 1987 is the result.

The ruling is not related to the recent Commerce Dept. administrative decision (see *PT*, December 1987) that the Bureau will conduct the 1990 Census "straight," with no statistical adjustments for the actual count.

— *A.H.*

Voters and Nonvoters

The links between demography and the U.S. election process are explored in the newest report in PRB's *Population Trends and Public Policy* series. Elections allow Americans to choose their representatives in government. But only 46 percent of the voting-age population cast ballots in the 1986 elections. U.S. demography has a bearing on who votes and which candidate is likely to win.

The greater the age, education, and income of an individual, the more likely he or she is to vote. These demographic factors are related to other characteristics like home ownership, ethnicity, and occupation which are also linked to the "propensity to vote."

Faced with escalating campaign costs, some political consultants are using the demographic data now available on computer to help maximize advertising, fund raising, and "get-out-the-vote" efforts by pinpointing geographic areas with likely voters.

Another new development in campaign tactics is the "enhancement" of political data bases by merging demographic and other geographic-based data with names and addresses from commercial mailing lists.

— *M.K.*

Copies of *Election Demographics*, by political consultant David B. Hill and PRB demographer Mary M. Kent, are available for $3.00 per single copy; 2-10 copies, $2.30 each; 11-50 copies, $1.90 each; 51 or more, $1.50 each. Orders of $50 or less must be prepaid and include $1.00 for postage and handling. Send order and remittance to Population Reference Bureau, Inc., Circulation Dept., PO. Box 96152, Washington, DC 20090-6152. Make checks payable to PRB.

The IUD Returns

The IUD is back. The contraceptive device is again being provided in the U.S., after almost disappearing from the list of available contraceptives in this country.

In October 1987 the nonprofit Population Council announced in New York that it had acquired the rights for the Copper T 380A IUD, and would license it to GynoMed Pharmaceutical, Inc. for marketing.

Once one of the most popular methods of contraception in the U.S., the intrauterine device fell in popularity (as have, to some extent, oral contraceptives) out of fear of harmful side effects in some cases. The Dalkon Shield, which was sold until 1974, was pulled from the market following reports of such side effects, which caused thousands of suits to be brought against its maker, A.H. Robins.

Continued on page 8

SURVEY REPORT

Sri Lanka

The results of a 1987 Demographic and Health survey show that Sri Lanka, the island nation just off the southeastern coast of India, has relatively good immunization coverage, increasing contraceptive use, and declining fertility. The survey of 5,865 ever-married women 15 to 49 years of age was national in scope, although it excluded less populous districts in the north and east of the country.

Beginning in the early 1980s, these districts have experienced the worst of the ethnic violence between extremists within Sri Lanka's largest minority, the Tamils, and the numerous and politically powerful Sinhalese.

Sri Lanka is one of the more fortunate South Asian countries, its current political unrest notwithstanding. While it is not as developed economically, its population has higher literacy rates and enjoys better health than the average for that region. In the 1960s and 1970s, the total fertility rate (the average number of lifetime births per woman) dropped from over 6.0 to 3.4. A "marriage boom" in the late 1970s contributed to a temporary increase in fertility to a 3.7 child average, reflected in the 1982 Sri Lankan Contraceptive Prevalence Survey. This 1987 survey shows that Sri Lankan fertility resumed its decline in the 1980s, recording an average TFR of 2.8 children between 1982 and 1986.

Contraceptive prevalence also increased. An estimated 62 percent of married women 15 to 49 were currently using birth control in 1987, compared to 55 percent in 1982 and only 32 percent in 1974. Contraceptive use as a whole now approaches U.S. levels (68 percent in 1982). Less effective traditional methods account for some of this; in 1987, 21 percent of the married women relied on rhythm, withdrawal, or prolonged abstinence for birth control.

World Bank

Women laborers on plantations are most likely to be surgically sterilized

However, 30 percent of the currently married women were protected by the most effective method – sterilization. Relatively small percentages relied on modern personal methods of birth control such as the pill and condoms, or on clinically supplied methods like the IUD and injection. Clearly, women were less likely to use methods which require repeated visits to a clinic or a pharmacy.

This preference probably reflects the type of family planning services available. Women living on "estates," primarily laborers on large tea, rubber, and coconut plantations, and the least educated women were most likely to have been surgically sterilized.

Nearly 80 percent of the women over 30 said they did not want any more children. About 69 percent in this age group were contracepting, 37 percent were sterilized or had husbands who were sterilized. This desire by older women to limit fertility is borne out in the fertility rates: The substantial drop in the TFR between 1974 and the 1982 to 1986 period was due entirely to declines in childbearing among women aged 30 and older.

The 1987 DHS survey found that recent child immunization campaigns have been fairly successful, except among the estate populations. Of the 77 percent of children under age 5 with a health card, over 80 percent had received the polio and diptheria-pertussis-tetanus vaccines, but only 48 percent had received a measles vaccine. Many of the 23 percent of children without a health card came from the estate populations, and from households in which the mother had no education.

Almost all Sri Lankan pregnant mothers received prenatal care and 87 percent of births during the 1982 to 1986 period were assisted by medically trained personnel, a partial explanation for the low infant mortality rate and generally good health status of Sri Lankan women.

—*M.K.*

DEMOGRAPHER'S PAGE

A Talk with China's Wang Wei

by H. Yuan Tien

On Sept. 22, 1987, the last day of a three-week visit to Beijing, I met with Wang Wei, head of China's Family Planning Commission.

The meeting was quickly scheduled and most informal. I arrived in the Commission's office building at 2 o'clock; with open collar and shirtsleeves rolled up to just below the elbows, Mr. Wang warmly extended his hand to greet me as he spryly descended the staircase. In the reception room, we sat on two sofas sandwiching a tiny tea table. An aide filled the cups and immediately withdrew. The only other person present was Liang Zhongtang, Director of the Office of Population Research, Shanxi Academy of Social Sciences, who had suggested and arranged the meeting the day before.

Born in 1919, Mr. Wang is a native of Hebei province, which surrounds Beijing. His Putonghua (spoken Chinese) carries the thick accent of Shandong, a province to the south. The years have turned his hair white but have had only slight impact on his face and none at all on his sparkling eyes.

Beyond Shortened Motherhood

Following brief pleasantries, Mr. Wang began by asking if there had been any new assessments of recent Chinese population trends, most particularly the rise in the birth rate to nearly 21 per 1,000 population in 1986 from the official figure of around 18 in 1983-1985. I knew of none, unless one counts some pejorative statements in the foreign media that have alleged a growing ineffectiveness in China's population programs.

Xinhua News Agency

Wang Wei.

He explained that there are now many more young people of reproductive age on account of the Chinese baby boom 20 years earlier. I interjected that the rise is probably owed in part to underreporting of births in 1983-1985. He quickly acknowledged this and added that because of rural couples' desire to have a son, underreporting has been prevalent when their first child is a girl.

> Underreporting and the small number of ensuing second births are not the issue.

But, he said, this underreporting and the ensuing small number of second births were not the issue. China's immediate problem, rather, lay in the reemergence of early marriage and early reproduction. These demographic trends inevitably exacerbate the impact of the baby boom and materially account for the recent rise in the birth rate. More important, they increase the likelihood of more second births as young men and women marry and have their first child earlier than did their counterparts in the 1970s.

I alluded to the probability of growing premarital sexual activities among youth. Mr. Wang took exception to this. I pointed out that China's population planning programs are not a cause in this regard, but that increased mobility, later marriage, more frequent contact between young persons, and the information included in high school textbooks on population planning could have contributed to it. He acknowledged that premarital sexual activities are on the rise, particularly in the cities.

As we talked about my research on the ramifications of China's family planning program,[1] he emphasized that the problem of finding work for young Chinese women who have completed their childbearing while in their early 20s had already come to his attention during his tours of the country. The urgency of the matter is greater in the countryside than in the cities (where meaningful alternatives to childbearing are more numerous), he said. Rural men are acutely affected by the need to address the aspirations and demands of their wives who are being suddenly liberated from the burden of extended childbearing.

China's Demographic "SDI"

I next gave Mr. Wang the April 1986 issue of *Population Today*, including my article on the continuing discussion inside China of the "one child per couple" policy. The article contained long passages from Mr. Wang's 1985 keynote speech at the Fourth National Conference of the China Demographic Society. It also detailed for the first time a Chinese view urging a second child 8-10 years after the first birth for up to 70 percent of the couples affected by the policy.[2]

I mentioned as well a warning appearing in *People's Daily* issued by the Research Center for the Promotion and Development of Technology in Beijing that if population growth is not strictly controlled and China's fertility continues unabated, the country's population at the century's end will exceed 1.3 billion.[3]

China's family planning program –

H. Yuan Tien is Professor of Sociology at the Ohio State University and a past Visiting Scholar at PRB

what might be called its Strategic Demographic Initiative – dates from the early 1970s. One stated goal of China's "SDI" was, Mr. Wang pointed out, to keep the total population "within 1.2 billion." This was established in the late 1970s when China's TFR was estimated to be at least 2.3. Thus, only with nearly full implementation of the "one-child" policy would it be possible to achieve this goal.

However, actual experience has made it necessary to accept the possibility of a total population of "around 1.2 billion" and, more recently in the words of Premier Zhao Ziyang, of "1.25 billion." Even this might be exceeded, Mr. Wang continued, because of the practical difficulties involved in further extending the acceptance of the "one-child" ideal.

With visible compassion, he voiced his deep concern for many couples in the poorer areas of China who would suffer major hardship if they only had one child. He also sympathetically recognized the need to continue exempting the country's many minority nationalities from the policy.

We agreed that since the early 1970s, the impact of China's SDI has been substantial. At the time of the program's start China's birth rate was nearly 34 and its TFR exceeded 6 (the current TFR is about 2.4). Although far from the calculations based on "one child per couple," the successes of China's initiative have been, and continue to be, impressive. Frequent childbearing among the Chinese is largely a thing of the past.

Reflections

Worldwide fascination with China's family planning program has been enormous. It has fed on the voluminous documents, statistics, pronouncements, reports, etc., concerning the program's many facets. There has, however, been a lack of information about its architects and implementors.

Created and given cabinet status in 1981, China's Family Planning Commission supplanted the Family Planning Leading Group (or Task Force) that was established in 1973 to set policies and administer programs. Madame Chen Muhua, the last chief of the Task Force, became the Commission's first head. Both immediately before and after the reorganization, Madame Chen played a major role in policymaking, after demographic research had been neglected in China for some 20 years. She accepted recommendations that were put together by statisticians, economists, system analysts, and others, who in late 1978 vigorously pushed for quantitatively specific population planning targets in general, and the "one child per couple" norm as the centerpiece of China's Strategic Initiative in particular.[4]

This marked a far-reaching diminution in fertility options – e.g., "One is not too few, two are ideal, and three are too many" – simultaneously alluded to in the Zhou Enlai Model during the initial years of China's SDI. Thus, when Dr. Qian Xinzhong (who is a physician) succeeded Madame Chen a year after the Commission was established, the scope and specifics of China's SDI remained firmly delimited. This made the implementation of the new measure Dr. Qian's first and foremost assignment in 1982-1983.

> Wang evidently has helped to moderate the advocacy of minimal reproduction

Mr. Wang assumed his post in late 1983. At that time China had already accumulated much experience in population planning in general, and reactions to the policy of minimal reproduction then abounded. Mr. Wang also led the Chinese delegation to the 1984 International Conference on Population in Mexico City. In the declaration issued at the conference's end, the injunction against high fertility argued that the fertility interests of the couple and society be balanced as a nation attempts to cope with consequences of population growth within the framework of socioeconomic development.

In China's case, the stipulations to stop at only one child apparently proved too strict for the couples affected by it, who proved capable of fending for their own interests. Numerous exemptions to the one-child ideal, for instance, have already been added to all provincial regulation. Promotion of the one-child ideal notwithstanding, China's TFR still hovers around 2.4. Now that their fertility is much lower than in previous decades, young Chinese couples have heeded the general terms of China's Strategic Demographic Initiative – but, in bearing one or two more than minimal reproduction, they have also demonstratively set limits to China's SDI.

Part of the increased realism may be surmised from the fact that the other person present at our Sept. 22 meeting, Mr. Liang Zhongtang, originally proposed in 1979 the option of a second child after an interval of 8-10 years. Mr. Liang now is in charge of an experimental population planning program based on his proposal. This experiment has been in progress during the last few years in Yi County of his native province of Shanxi.

Conversation with Mr. Wang also provided a final piece of the puzzle as to why, in his speech at the Fourth National Conference of the China Demographic Society, he omitted any reference to the one-child policy. More important, it also disclosed much sensitivity on his part to sociological issues arising from population planning. His utterances during our hour-long conversation indicated compassion and pragmatism in the discharge of his duties. It fleshed out his 1985 concern that, beside effectively controlling population growth, population planning programs "must also bring closer together the Party and the people as well as enhance stability and unity."[5]

Continued on next page

Demographers Page

Continued from preceding page

As third head of the Family Planning Commission after having served as the senior deputy head under Dr. Qian, Mr. Wang clearly has been in a better position that his predecessors to draw lessons and to "seek truth from fact." In China, as the warning cited earlier in the *People's Daily* suggests, the one-child fertility debate is still continuing in various circles. He evidently has helped to moderate the advocacy of minimal reproduction. He has emerged as a maker as well as an implementor of policy. His remarks stem from the interplay of his dual roles in policymaking and policy implementation and, therefore, carry considerable weight.

Hearing them thus is far better than seeing 10,000 numbers. As we said good-bye, Mr. Wang warmly and repeatedly asked that our conversation be continued whenever I return to Beijing.

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IUDs

Continued from page 4

The reason IUDs were virtually taken off the market in the U.S. was manufacturers' fear of product liability suits from users. Even though the IUD is considered a safe and reliable contraceptive for many users, the cost of even successful legal defense has had a chilling effect on manufacturers. (IUDs continue to be a major form of birth control in other countries and are the most prevalent contraceptive method in China.)

In 1986 two major IUD manufacturers, Ortho Pharmaceutical and G.D. Searle, halted sales, which together had accounted for 95 percent of the U.S. IUD market and 100 percent of the copper-bearing IUD market. Since that time the Alza Corporation had been the only U.S. producer; Alza urges doctors to ask women patients to sign a consent form before using their hormone-releasing Progestasert IUD.

GynoMed is using a similar consent form, in which the woman acknowledges in writing that she has discussed the risks and benefits of the IUD with her doctor.

—A.H.

Birth Control, Fertility In 110 Countries

During the past two decades a historic family planning revolution has taken place around the world.

The extent of its progress has varied from place to place. But the new "World Access to Birth Control" data sheet, published by the Washington-based Population Crisis Committee, graphically traces the course of this revolution in 95 less developed and 15 developed countries that together include over 95 percent of the world's population.

The data sheet does so by summarizing two variables: (1) the percentage of decline in the country's total fertility rate (TFR: the lifetime number of children per woman) from 1970-1975 to 1985-1990 (projected); and (2) access to contraceptive methods in each country.

Not surprisingly, the two variables are related. Countries scored high by PCC in birth control access tend also to show significant reductions in fertility. The top 10 less developed countries with the best birth control access, as scored by PCC according to a formula that takes into account availability of method and information, the level of government funding, and similar factors, are:

1. Taiwan
2. Singapore
3. South Korea
4. China
5. Hong Kong
6. Colombia
7. Sri Lanka
8. Panama
9. Cuba
10. Mexico

PCC calculates that out of the 2.8 billion people in developing countries outside China, 660 million are women in the reproductive ages 15-49. About 460 million of these are sexually active; excepting those who are infertile or already pregnant, about 370 million women can be considered at risk of pregnancy. Of those at risk, 124 million are now using an effective contraceptive method, while the remaining 250 million are unprotected.

PCC provides the "World Access to Birth Control" wall chart (18 x 24 inches) free on request in limited quantities. Contact: Population Crisis Committee, 1120 19th St. N.W., Washington, D.C. 20036. Attention: Julie Norbury.

The Unfinished Story

Millions of couples in the less developed countries lack the means to plan their families, despite the fact that half the 463 million married women of reproductive age outside China want no more children and millions more would like to delay their next birth, writes Jodi L. Jacobsen, author of "Planning the Global Family," the latest in the *Worldwatch Paper* series published by the Worldwatch Institute.

Despite slowing world population growth rate since the early 1970s, annual additions to world population have increased from 74 million in 1970 to 86 million in 1987. "If the needs of even half of the women lacking access

to family planning had been satisfied, annual additions to human population would now be falling instead of rising," Jacobsen says.

In the developing world, only Cuba, Singapore, South Korea, and Taiwan have achieved replacement level fertility. Impressive reductions have been made in Brazil, China, India, Indonesia, and Mexico, but fertility rates remain moderately high – above 3.5 children per woman – in all but China. And pockets of extremely high fertility – above 6 children per woman – still exist throughout Africa and the Middle East.

"The recent experiences of several nations," Jacobsen notes, "suggest a close relationship between effective voluntary family planning programs, rising levels of contraceptive use, and declining fertility even in the absence of broad-based economic gains." Even so, few countries have put family planning at the top of their agendas.

The gap between family planning use and desire means the developing-country population will grow faster than need be. "Countries that remain on a high fertility path will find that meeting basic subsistence needs will be increasingly difficult in the years to come," the *Worldwatch Paper* argues.

Moreover, family planning offers significant health benefits. Each year up to a million women worldwide die from pregnancy-related causes. Fully 99 percent of these deaths occur in the Third World where complications arising from pregnancy and illegal abortions are the leading killers of women in their 20s and 30s. At least half of all maternal deaths could be averted through a combined strategy of family planning, legal abortion, and primary health care, according to the paper.

– J.A.

To order "Planning the Global Family," *Worldwatch Paper 80*, contact: Worldwatch Institute, 1776 Massachusetts Ave. NW, Washington, D.C. 20036. $4.00 for 1 copy. Multiple copy price information available from Worldwatch.

SOFTWHERE

For those microcomputer users with an interest in Canadian data, *PT* has come across a wealth of data on diskette on population, vital statistics, and manufacturing.

The three-part data package comes from Statistics Canada: Part 1 includes data for census divisions (Atlantic, Quebec, Ontario, and the Western provinces) as well as the entire country. Part 2 is a software utility for accessing the data, which can also be used in Lotus for custom analysis. Part 3 is a comprehensive guide explaining the variables and using the data diskettes on an IBM PC or compatible computer.

There are 15 diskettes covering Canada as a whole and one to three diskettes covering each division. Statistics Canada, Small Area and Administrative Data Division, offers the three parts for $360 for Canada or $99 per division. This is a real bargain for the amount of data available on vital statistics, population, migration, incomes, unemployment, farms, building permits, and manufacturing industries. The data cover 1977 to 1983 and will be annually updated.

Contact Cecile Dumas of Statistics Canada at 613-951-8525 for inquiries and purchase information.

– D.L.

POPULATION UPDATE

Estimated United States Population:

As of September 1, 1987	244,202,000
As of September 1, 1986	241,995,000

The above estimates, the latest available, include armed forces overseas and are from U.S. Bureau of the Census, *Current Population Reports*, Series P-25, No. 1013.

Estimated World Population:

As of January 1988	5,076,000,000
Annual growth	87,000,000

Estimated by extrapolation from the mid-1987 population on PRB's *World Population Data Sheet*.

Latest Provisional Statistics for the U.S.: August 1987

	12 months ending with August					
	Number		Rate			
Item	1987	1986	1987	1986	1985	1984
Live births	3,788,000	3,728,000	15.6	15.5	15.8	15.5
Deaths	2,114,000	2,095,000	8.7	8.7	8.8	8.6
Natural increase	1,674,000	1,633,000	6.9	6.8	7.0	6.9
Marriages	2,422,000	2,394,000	10.0	10.0	10.3	10.4
Divorces	1,164,000	1,161,000	4.8	4.8	5.0	4.9
Infant deaths	38,000	39,300	10.0	10.6	10.6	10.7
Population base (in millions)			242.5	240.2	237.6	235.2

Note: Rates are given per 1,000 population, except for infant deaths, which are given per 1,000 live births.

Source: *Monthly Vital Statistics Report* (Vol. 36, No. 8) from the National Center for Health Statistics.

TAKE A NUMBER

Survey Results: Recent fertility surveys received at PRB report the following: in Morocco, a 1987 survey measured continuing fertility decline with a total fertility rate (TFR) of 4.3 children per woman for the period 1982-1987, down from 5.9 in 1975-1980; contraceptive prevalence among married women for the same periods rose from 19.6 to 35.9 percent. A 1986 survey in Colombia put the TFR at 3.4 for 1981-1986 with 63 percent of married women using some form of contraception. In 1969, Colombia's TFR was reported as 6.7 children per woman. In Nigeria, a survey conducted in Ondo State (containing about 3 percent of the country's population) in 1986 reported a TFR of 6.2 children per woman. About half of the married women had heard of contraception and knew of a source, but only 10 percent had ever used it and only 6 percent were actually practicing some form of family planning. Finally, El Salvador's 1985 survey also reported a considerable drop in fertility, to a TFR of 4.4, down from about 6 in the 1970s. About 47 percent of the currently married women said they were using some method of family planning, a large proportion of these women relying on sterilization. Full reports on these surveys will appear in future *PTs*.

A Question of Numbers: Recent press reports have noted that the United States is in "last place" among 20 "industrialized nations" in infant mortality. (That is, its infant mortality rate is higher than the others.) Such statements lead one to dwell again on the business of ranking countries on specific subjects, particularly if such rankings conveniently result in press-release-ready phrases such as "last place" and round numbers such as 20. While there is no accepted definition of "industrialized," the most frequently used United Nations definition of "developed" lists over 40 such entities ranging from the USSR to the Channel Islands. In the U.S., the infant mortality rate has been cut in half since 1970, from 20 to 10 infant deaths per 1,000 live births. Declines in other countries, such as Japan, have been more dramatic, down to 6 (a rate which may suggest itself as close to a theoretical minimum), but the U.S. is not at all out of line with many other developed countries such as West Germany, Australia, and the United Kingdom. Not that there isn't an issue here. If the U.S. had Japan's rate, there would be about 21,000 infant deaths annually instead of the current 38,000 (out of 3.8 million births). Much of the higher U.S. rate is rooted in poverty and the resultant lack of prenatal care. Perhaps more sensational statements are needed to grab public attention, but one must wonder about the cumulative effects of what some see as a questionable use of statistics.

– C.H.

LETTER TO THE EDITOR

Coverage of California's Section 4213 confidential marriages (see *PT*, November 1987) omitted mention of the most likely cause. The "marriage penalty" of higher federal income taxes encourages couples to "record" their marriages inconspicuously so that they can file as single individuals. State taxes in California exact no marriage penalty, so federal statutes are behind the phenomenon.

If and when the federal marriage penalty disappears, so will "confidential marriages."

Raymond R. White
Dept. of Biology
City College of San Francisco

ADDENDA

"Our next speaker – an expert on the vanishing middle class."

From the *Wall Street Journal* – Permission, Cartoon Features Syndicate

CURRENT READINGS

PRB welcomes materials on population topics for possible inclusion in Current Readings. Publishers may address review copies to Book Review Editor, POPULATION TODAY, Population Reference Bureau, 777 14th St., N.W., Washington, D.C. 20005.

THE TRULY DISADVANTAGED: The Inner City, the Underclass, and Public Policy, by William Julius Wilson. Chicago: University of Chicago Press, 1987. $19.95. ISBN 0-226-90130-0.

I like this type of book. It provides a substantive interpretation, backed by sound statistical information, of a major social problem. Wilson documents the rise of social pathologies such as crime, joblessness, teenage motherhood, welfare dependency, and educational shortcomings which characterize many black inner-city neighborhoods, but he also provides a refreshing interpretation of these facts easily distinguishable from the 1960s "knee-jerk liberal" view or the conservative perspective in vogue during most of the 1980s.

In many ways, *The Truly Disadvantaged* continues a line of thought Wilson started in his controversial *Declining Significance of Race*, published nearly 10 years ago. Then Wilson suggested that the situation of blacks in the mid-1970s must be seen in broader terms than racism. This theme is picked up and amplified in this most recent book which attempts to describe and explain the rise of a black urban underclass. While there is undoubtedly a racial component to this phenomenon, Wilson argues convincingly that race alone is not sufficient to describe what has happened.

It may also gladden demographers' hearts to find that Wilson employs several demographic concepts, such as selective outmigration and differential sex ratios, to help explain the plight of many inner-city blacks. Wilson argues, for example, that middle-class and upper-class blacks left black inner-city neighborhoods in the 1960s and 1970s, leaving behind a group that has become an underclass. The flight of middle-class blacks from these neighborhoods also removed an important element in the social fabric that provided a buffer in earlier times.

Wilson also suggests it is the lack of marriageable black males that is largely responsible for the dramatic increase in out-of-wedlock births and female-headed families in the underclass areas. By calculating a Male Marriageable Pool Index (MMPI), which gives the number of employed males in the same age group per every 100 females, Wilson shows how the marital prospects for black women have fallen during the past few decades and how the marriage prospects of black women are very different from those for white women.

But Wilson's dominant argument attempts to explain the emergence of a black urban underclass as a consequence of the economic transformation that has eliminated large numbers of jobs for unskilled or semiskilled workers in central cities. Wilson also argues that the best remedy for the black urban underclass is not race-specific remedies targeted directly at this group, but rather broad-based full employment policies which will provide job opportunities for this group.

Wilson's book is a refreshing alternative to the conservative explanations that blame government social policy or individual inadequacies for the plight of the underclass, or liberal views that the problem is solely due to racism. Wilson clearly portrays the problem's nature and seriousness, provides a convincing sociological explanation of why it has emerged, and offers some guidelines to formulate new public policies which will deal effectively with it. What more can you ask of an author?

– William O'Hare

PERSPECTIVES ON POPULATION: An Introduction to Concepts and Issues, edited by Scott W. Menard and Elizabeth W. Moen. New York: Oxford University Press, 1987. 487 pages. $39.95 hardback, $24.95 paper. ISBN 0-19-504092-9.

In the expanding field of demography and its increasing number of textbooks, *Perspectives on Population* is a distinctive work. Menard and Moen are providing a reader to be used in undergraduate or graduate courses. The book can stand on its own or with limited supplementary material as the primary text in a course on population.

Each section has an introduction which briefly summarizes the fundamental material on the basic rates and measures presented in most population textbooks and a list of suggested books which provide more extensive detail on the topics. Then, studies by eminent people in the field, such as Ansley Coale, Philip Hauser, Kingsley Davis, John Bongaarts, and Samuel Preston, are presented. The thoughtful, diverse selection of the studies not only illustrates their demographic as well as societal importance, but also stimulates the students for lively discussions in the class. These range from Hardin's "The Tragedy of the Commons" to Simon's "World Population: An Anti-Doomsday View"; from China's one-child family policy and fertility policy in India to explicitly pronatalist policies in Eastern Europe. Overall, this is a book that shows population in its different roles as dependent and independent variable.

– Nazy Roudi

SPOTLIGHT

FRANCE

Population (1986 est.): 55.6 million
Land area: 212,668 sq. mi.
Births per 1,000 pop. (1986 est.): 14
Deaths per 1,000 pop. (1986 est.): 10
Rate of natural increase (1986 est.): 0.4 percent
Total fertility rate (1986 est.): 1.8
Infant mortality rate (1986 est.): 8.1 infant deaths per 1,000 live births
Life expectancy at birth (1986 est.): 75 years
GNP per capita (1986 est.): $9,550
Capital: Paris

by Wendy Patriquin

France, about the size of Montana and Idaho combined, is the largest country in Western Europe. It was also one of the first countries to make the transition from high to low fertility during the 18th and 19th centuries. Its estimated population in 1800 was 24 million; in 1900, 41 million. The traditional, anonymously coined phrase "50 million Frenchmen can't be wrong" is in a sense a tribute to the stability of France's population size during most of the 20th century.

Prior to World War II, France's government went through three different periods in political history, or Republics. The First was the period prior to the revolution in 1789, the Second until the Franco-Prussian war (1789-1870), and the Third until France's defeat in 1940. Between 1945 and 1958, a tumultuous period in France, Charles de Gaulle led the Fourth Republic, which ended with governmental division over the future of Algeria. The current constitution, established under the Fifth Republic in 1958, puts executive power in the hands of the President.

The majority of the population (about 90 percent) is Roman Catholic. French is the primary language, although there are small groups of Breton and Basque speakers.

Possibly because of the country's early fertility decline, French people never emigrated on the scale of some other European nations; on the contrary, France has often experienced waves of immigration. Between the two World Wars, about 3 million people entered the country. After the establishment of an independent Algerian state in 1962, about 1 million French citizens in Algeria emigrated to France. As of December 1982, France's immigrant population was officially estimated at 4.5 million.

Resident aliens fall into two main groups: Southern Europeans (52 percent), and North Africans (26 percent), the two principal nationalities being Portuguese and Algerian.

As Western Europe's leading agricultural producer, France uses nearly 60 percent of its land for farming. Agriculture employs only 7.8 percent of the labor force, down from 15 percent in the late 1960s.

Also a large industrial nation, France's industry grew 33 percent between 1970 and 1980 and has continued to grow at a slower rate. The current government of Jacques Chirac is in the process of privatizing 65 state-owned industrial, banking, and financial holding companies, including companies that had been nationalized by the Socialist government in 1982. It is hoped that the sale of these state-owned companies will reduce the state debt.

The Left Bank of Paris (whose metropolitan population tops 10 million).

There have been some recent shifts in policies and attitudes toward immigrants, perhaps spurred by recent double-digit unemployment. Few new foreign workers are accepted and most new immigrants arrive for purposes of family reunification. One leading conservative has even called for the expulsion of North African immigrants.

Currently, the government considers that the fertility level is low and has declared a subtle pronatalist policy with incentives to increase fertility. These measures include family allowances, a special grant for the third child, maternity leave, and easier housing loans for growing families.

France's birth rate was among the highest in Europe from 1945 until the late 1960s, when it began to decline. In the past few years, the level of births has continued to fall, yet France's birth rate is still higher than that of nearly all other West European countries except Ireland. In 1986, the birth rate was 14.0 births per 1,000 population, a level it has hovered at since 1975, down from about 18.0 in the mid-1960s and up from 13.7 in 1983. Mortality has remained around 10.0, and infant mortality has been declining steadily in the postwar period. France's total fertility rate currently stands at 1.84, up from 1.78 in 1983.

The percentage of births out-of-wedlock has been increasing in recent years and stood at 19.6 percent of all births in 1986, up from 8.8 percent in 1977.